



APPLICATION FOR AGENT'S PERMIT

State Form 39286 (R3 / 7-97)

Approved by State Board of Accounts 1988

INDIANA COMMISSION ON PROPRIETARY EDUCATION

NOTE: This form must be completed for each new agent representing an institution. If all of the information which is required on this form is not provided, the form will be returned to the institution.

OFFICE USE ONLY

Fee paid

\$

Check receipt number

Card number

Approval date:

From

To

1. Name and location of institution(s) to be represented on permit:

2. Name of applicant

Address (*number and street*)

City

State

ZIP code

Telephone number

3. Have you ever been employed as an agent for any public or private institution?

☐ Yes

☐ No

(a) If you answered yes, please list all former institutions. State period of time employed with each institution listed.

4. Have you ever been denied a license to represent an institution in any state?

☐ Yes

☐ No

(a) If you answered yes, state reason(s):

5. REFERENCES: LIST THREE CHARACTER REFERENCES NOT RELATED TO YOU. (*Include their names, addresses and telephone numbers*)

6. Birthdate

Birthplace

U.S. Citizen?

☐ Yes

☐ No

Date of naturalization

7. Have you ever been convicted of a felony?

☐ Yes

☐ No

(a) If you answered yes, give details in full:

8. Have you ever been convicted of a crime involving moral turpitude?

☐ Yes

☐ No

(a) If you answered yes, give details in full:

AFFIDAVIT

I hereby swear or affirm that the above statements are true.

Signature of applicant

STATE OF _____

COUNTY OF _____

} SS:

Subscribed and sworn to before me this _____ day of _____, 19 _____.

Signature of Notary

Printed name of Notary

My Commission expires:

County of residence: